## **SCHEDULE A: Apartment Rental Income**

Property Location:	Apartment Property	Calendar Year:
Parcel ID:	Rental Income Statement	Submitted By:

Residential Rental Information: Please provide the following rental information.

Unit Type	No. of Units	Room Count		Monthly Rent		Typical Lease Term	Includes the following:
	Total	Rooms	Bathroom	Per Unit	Total	Lease or Tenant at Will (TAW)	W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
Single Room Occupancy(SRO)							
Studio							
1 Bedroom							
2 Bedroom							
3 Bedroom							
4 Bedroom							
Other Rentable Units (Furnished Units)							
Owner/Manager/Janitor Occupied							
SUBTOTAL							
Garage Parking Space							
Outdoor Parking Space							
Other Income (Specify)							
TOTAL							

## ANNUAL INCOME AND EXPENSE SUMMARY REPORT

Parcel ID:		Calendar Year: 2021					
Property Address:		Mailing Address:					
Owner:		City/State/Zip:					
1. Primary Property Use: Apartment Office: Retail Industrial Mixed Use Other							
2. Gross Building Area (Sq. feet)		6. Number of Units					
3. Net Leasable Area (Sq. feet)		7. Number of Parking Spaces					
4. Owner Occupied Area (Sq. feet)		8. Actual Year Built					
5. Common Area (Sq. feet)		9. Year Remodeled					
ANNUAL INCO	ME	ANNUAL EXPENSES					
10. Apartment Rentals (Sched. A)	\$	22. Advertising	\$				
11. Office Rentals (Sched. B)	\$	23. Cleaning and Maintenance (Incudes Snow Removal and Trash Removal)	\$				
12. Retail Rentals (Sched. B)	\$	24. Commissions/Leasing Fees	\$				
13. Industrial Rentals (Sched. B)	\$	25. Insurance (Building Only)	\$				
14. Mixed Use Rentals (Sched. C)	\$	26. Professional & Legal Fees	\$				
15. Other Rentals	\$	27. Management/Admin Fees	\$				
16. Parking Rentals	\$	28. Repairs and Maintenance	\$				
17. Common Area Maint. (CAM)	\$	29. Supplies	\$				
18. Other Property Income (billboard, cell tower, etc.)	\$	30. Utilities (paid by owner)	\$				
19. Total Potential Gross Income	\$	31. Other	\$				
20. Vacancy and Collection Loss	\$	32. Reserves for Replacement	\$				
21. Effective Gross Annual Income (Subtract Line 20 from Line 19)	\$	33. Total Expenses Add lines 22 to 33	\$				
	1						
I certify under the pains and penalties of perjury that the information supplied herewith is true and correct							
Submitted by:		Title: Phone:					
Signature:							
The above identified property is own	er occupied						
The above identified property is leased to a related person, corporation, or business entity							